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PATENT APPLICATION **TRANSMITTAL**

Attorney Docket No.		NTI-004	Total Pages	95)
First I	nventor or App	lication Identifier	Linard Karklin	
Title	"System And I	Method Of Providing	Mask Quality Control"	ТО
Expres	ss Mail Label N	o. EL5971987	00US	,

(Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mo				ail Label No.	EL597198700US				
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.				Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC 20231					
2. Apply Sec. 3. Spec (pref	Transmittal Form (e.g., PTO/SI mit an original, and a duplicate plicant Claims small entity statu 37 C.F.R. § 1.27. Effication Ferred arrangement set forth below Descriptive title of the Invention Cross References to Related A Statement Regarding Fed-Spot Reference to sequence listing, or a computer program listing Background of the Invention Brief Summary of the Invention Brief Description of the Drawin Detailed Description Claim(s)	for fee process s. [Total] w) on applications nsored R&D a table, appendix	ing) Pages <u>60</u>]	Prog. 8. Nucleoti (if ap a. b. c. 9. Assig. 10. 37 C	ram (Appendix) de and/or Amino Acid pplicable, all necessary Computer Readab Specification Sequence i. CD-ROM or Cl ii. Paper	ple Form the Listing on: D-R (2 copies); or and identity of above copies PLICATION PARTS Sheet & document(s)) The Power of Attorney	rr		
4. ⊠ Dra 5. ⊠ Oat a. b.	Abstract of the Disclosure awing(s) (35 U.S.C. § 113) th or Declaration Newly executed (original Copy from a prior applica (for continuation/divisional completed) i. DELETION OF IN Signed statement inventor(s) named it see 37 CFR 1.63(d) plication Data Sheet. See 37 C.	Total or copy) ation (37 CFR al with Box 17 EVENTOR(S) at attached del n the prior app (2) and 1.33(b)	7 leting plication,	 11. ☐ English Translation Document (if applicable) 12. ☐ Information Disclosure ☐ Copies of IDS Citations Statement (IDS) PTO-1449 13. ☐ Preliminary Amendment 14. ☑ Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. ☐ Other: 					
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 C.F.R. § 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No/ Prior application information: Examiner Group/Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.									
18. CORRESPONDENCE ADDRESS									
∑ Customer Number or Bar Code Label									
NAME									
ADDRESS	2099 Gateway Place, Suite 32	r							
CITY	San Jose	STATE	CA		ZIP CODE	95110-1017			
Country	US	Phone	+1 (408)45	1-5907	FAX	+1 (408)451-5908			
Name (P	Print/Type) Jeanette S. Harris	//		Registrat	ion No. (Attorney/Agent)	35,537	1		

Name (Print/Type)	Jeanette S. Harris	Registration No. (Attorney/Agent)	35,537
Signature	MMM	Date	.7-20-01

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$) 1,051.00

	Col if Known	
Application Number	Filed Herewith	
Filing Date	Filed Herewith	
First Named Inventor	Linard Karklin	
Examiner Name	unknown	
Group/Art Unit	unknown	
Attorney Docket Number	NTI-004	

METHOD OF PAYMENT (check one)				FEE CALCULATION (continued)							
The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:			3. AD	DITIO	NAL FEE	S	•				
Deposit			Large	Entity	Small	Entity				Ess	
Account 50-0574) (Docket No. NTI-004)			Fee	Fee	Fee	Fee		Fee Descri	ption	Fee Paid	
Number			Code	(\$)	Code	(\$)			_		
Deposit				105	130	205	65	_	- late filing fee or		
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Name				139	130	139	130	Non-Engl	ish specification		
			Fee Required	147	2,520	147	2,520	_		arte rexamination	
		FR §§ 1.16 a	and 1.17 entity status.	112	920	112	920	Requestin Examiner	g publication of S	IR prior to	
	ee 37 C.F.I		mity status.					<u> </u>	action		
2. Payment l		-		113	1,840	113	1,840		g publication of S	IR after Examiner	
								action		_	
	Credit Ca	ard []	Money Order	115	110	215	55	Extension	for replay within	first month	
	FEE C	CALCULA	ATION	116	390	216	195	Extension for reply within second month			
黃 BASIC FILIN	G FEE			117	890	217	445	Extension	for reply within t	hird month	
Large Entity	Small	Entity		118	1,390	218	695	Extension	for reply within f	fourth month	
Lee Fee	Fee Code	Fee (\$)	Fee Description Fee Paid	128	1,890	228	945	Extension	for reply within f	ifth month	
710	201		Itility filing fee 355.00	119	310	219	155	Notice of	Appeal		
iig6 320	206	160 E	Design filing fee	120	310	220	155	Filing a bi	rief in support of a	an appeal	
190	207	245 P	lant filing fee	121	270	221	135	Request fo	or oral hearing		
€108 710	208	355 R	teissue filing fee	138	1,510	138	1,510	Petition to	institute a public	use proceeding	
150	214		Provisional filing	140	110	240	55	Petition to	revive - unavoid	able	
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2=EXTRA CLAIM FEES Fee from				142	1,240	242	620	Utility issue fee (or reissue)			
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Multiple Dependent			135.00 = -0-	122	130	122	130	Petitions to the Commissioner			
•		-	or Reissues, see below	123	50	123	50	Petitions re	elated to provision	nal applications	<u> </u>
Large Entity Fee Fee	Small Fee	Entity Fee		126	180	126	180	Submissio	n of Information	Disclosure Stmt	
Code (\$)	Code	(\$)	Fee Description								
103 18	203	9	Claims in excess of 20	581	40	581	40		s each patent assig mber of properties	grament per property	40.00
102 80	202	40	Independent claims in excess of 3	146	710	246	355		ıbmission after fü	•	
104 270	204	135	Multiple dependent claim, if	149	710	249	355	For each a	dditional inventio	on to be examined	
100 0-			not paid]				(37 CFR 1.129(b))		<u> </u>	
109 80	209	40	**Reissue independent claims over original patent	179	710	279	355	Request for Continued Examination (RCE)			
110 18	210	9	**Reissue claims in excess of 20 and over original patent	169	900	169	900	Request fo		nination of a design	
20 and over original patent				Other fee (Specify)						
SUBTOTAL (2) (\$) 656.00											·
					by Basic F	iling Fee Paid			SUBTOTA	AL (3)	(\$) 40.00
SUBMITTED BY									Complete (if	applicable)	
			Registration (Attorney/A		35,537			Telephone	(408) 451-590)7	
Signature				·					Date	> 24 44	